	PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003								10/508831			
_	CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL TYPE	ENTITY	OI		ER THAN L ENTITY
	OTAL CLAIM	S 				·		RAT	FE	<del></del>	RATE	<del></del> :
F				ER FILED NU		MBER EXTRA		BASIC F	EE	OF	BASIC FE	E 1080
Ţ	NDEPENDENT CLAIMS 45			ทุเกบร 20 <sup>:</sup> =	. 92			XS.9:		ÖF	X\$18=	450
IN				minus 3 =				X43=			Yes	1.50
М	ULTIPLE DEPE	NDENT CLAIM F	. D-			1		<u> </u>	- $ $ OF	700=	258	
* If the difference in column 1 is less than zero, enter "0" in column 2								+145=		OF	-290=	900
									- L	OF	TOTAL	
	CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SMAL	L ENTITY	OR		R THAN . ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONA FEE		RATE	ADDI- TIONAL FEE
NON	Total	. 45	Minus	H5		=		XS 9=		OR	XS18=	1
AME	Independent	- 6	Minus	6		=	ľ	X43=	1	OR	X86=	1/-
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=	<del>                                     </del>	7	-	1.
	·									OR	+290= TOTAL	1
	•	(Column 1)					A	TOTAL DDIT. FEE	- 8	JOR	ADDIT. FEE	
,		·	(Columi	ST	(Column 3)	Г	<del></del>	ADDI-	7 1	· ·	LADDI	
AMENDMEN! B		REMAINING AFTER AMENDMENT		PREVIOU PAID FO	ISLY	PRESENT EXTRA	L	RATE	TIONAL		RATE	ADDI- TIONAL FEE
ב צ	Total	• '	Minus	66 .		= .		XS 9=		OR	X\$18=	
AM	Incependent FIRST PRESE	INST PRESENTATION OF MULTIPLE DE		•••		=		X43=		OR	X86=	
				LIVERIU			Γ.	+145=		OR	+290=	•
				•			<u>ا</u> دو	TOTAL DIT. FEE		OR	TOTAL	
	(Column 1) (Column 2) (Column 3)									<b>.</b>	WOII. FEEI	
	·	CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBEI PREVIOUS PAID FOI	T R SLY	PRESENT EXTRA		RATE	ADDI- TIONAL		RATE	ADDI- TIONAL
	lotal .		Ainus	**		=	T,	<b>(\$ 9=</b>	FEE	_	X\$18=	FEE
	ndependent		/linus	***		<u> </u>	-			OR -		
	IRST PRESEN	NTATION OF MUL	TIPLE DEF	ENDENT C	MIA		H	<b>(43=</b>	· -	OR	X86=	
Ħt	he entry in colum	n 1 is less than the	anta, in and				L+	145=		OR	+290=	·
	ne "Highest Num Ihe "Highest Num	ber Previously Paid ther Previously Paid ther Previously Paid ter Previously Paid I	For IN THIS	S SPACE is les	s than	20, enter "20."	ADD	TOTAL IIT. FEE			TOTAL DDIT. FEE	,

FORM PTO-875 (Rev 10:03)

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